

Provider Inspection Summary

For the period 06/01/2003 to 05/31/2006
Community Based Residential Facility
CLASS CS (SEMIAMBULATORY)

Facility Information

Facility Name: FARDALE HOME (310716)

Address: 3031 W FARDALE AVE, MILWAUKEE, WI 53221

License Status: REGULAR

Licensed/Certified/Registered 03/01/1999

Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

Survey History

Survey ID: 0096700 **End Date:** 03/22/2006 **Type:** STANDARD **Purpose:** SURVEY/COMPLAINT/SELF REPORT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0094073 **End Date:** 02/01/2005 **Type:** OTHER **Purpose:** COMPLAINT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #10009065 Served 02/15/2005

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
83.07(2)(b)	CHANGE	03/22/2006	Yes
83.32(1)(b)	WRITTEN REPORT OF ASSESSMENT	03/22/2006	Yes
83.33(2)(a)	SUPERVISION	03/22/2006	Yes

Survey ID: 0093023 **End Date:** 07/13/2004 **Type:** ABBREVIATED **Purpose:** SURVEY/COMPLAINT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #10008726 Served 07/29/2004

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
83.33(2)(c)	LEISURE TIME ACTIVITIES	02/01/2005	Yes

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Enforcement History

Date: 02/10/2005 SOD #10009065 Appealed: Yes Decision: STIPULATION

Sanctions

COMPLY WITH REQUIREMENT
FORFEITURE---83.32(1)(b)
FORFEITURE---83.33(2)(a)

Date: 07/26/2004 SOD #10008726 Appealed: No

Sanctions

COMPLY WITH DEPARTMENT PLAN OF CORRECTION

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Provider Inspection Summary

For the period 06/01/2003 to 05/31/2006
Community Based Residential Facility
CLASS CS (SEMIAMBULATORY)

Complaint History

Date Complaint Received: 05/09/2006

Date Investigation Completed: 06/29/2006

<u>Subject Area(s)</u>	<u>Result</u>	<u>SOD #</u>
SUPERVISION	NOT SUBSTANTIATED	
RESIDENT RIGHTS	NOT SUBSTANTIATED	
NUTRITION & FOOD SERVICES	NOT SUBSTANTIATED	
MEDICATIONS	NOT SUBSTANTIATED	
STAFF TRAINING AND PROFICIENCY	NOT SUBSTANTIATED	
STAFF ADEQUACY	NOT SUBSTANTIATED	

Date Complaint Received: 01/09/2006

Date Investigation Completed: 03/22/2006

<u>Subject Area(s)</u>	<u>Result</u>	<u>SOD #</u>
RESIDENT RIGHTS	NOT SUBSTANTIATED	
PHYSICAL PLANTS & SAFETY HAZARDS	NOT SUBSTANTIATED	
HOMELIKE ENVIRONMENT & CLEANLINESS	NOT SUBSTANTIATED	
MEDICATIONS	NOT SUBSTANTIATED	

Date Complaint Received: 12/29/2004

Date Investigation Completed: 02/01/2005

<u>Subject Area(s)</u>	<u>Result</u>	<u>SOD #</u>
LICENSED CAPACITY /CLASS OF LICENSE	NOT SUBSTANTIATED	
SUPERVISION	NOT SUBSTANTIATED	
PHYSICAL PLANTS & SAFETY HAZARDS	SUBSTANTIATED	NOT RECORDED
HOMELIKE ENVIRONMENT & CLEANLINESS	NOT SUBSTANTIATED	
NUTRITION & FOOD SERVICES	SUBSTANTIATED	NOT RECORDED
ADMISSION, TRANSFER & DISCHARGE	SUBSTANTIATED	10009065
STAFF TRAINING AND PROFICIENCY	NOT SUBSTANTIATED	
STAFF ADEQUACY	NOT SUBSTANTIATED	

Date Complaint Received: 09/02/2004

Date Investigation Completed: 02/01/2005

<u>Subject Area(s)</u>	<u>Result</u>	<u>SOD #</u>
SUPERVISION	SUBSTANTIATED	10009065
ADMISSION, TRANSFER & DISCHARGE	SUBSTANTIATED	10009065

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Community Based Residential Facility
CLASS CS (SEMIAMBULATORY)

Date Complaint Received: 10/31/2003

Date Investigation Completed: 07/13/2004

Subject Area(s)

RESIDENT RIGHTS
NUTRITION & FOOD SERVICES
MEDICATIONS

Result

NOT SUBSTANTIATED
NOT SUBSTANTIATED
NOT SUBSTANTIATED

SOD #

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